

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) (CFA-4)

Summary	Sheet
FILE NUM	BER

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT?

Yes

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TOTAL PAGES IN ENTIRE CFA-4 REPORT
2

COMMITTEE INFORMATIO	N			
1. Full Name of Committee (as on Statement of Organization) Check if this is a new name				
GRAham for Judge Committee				
2. Acronym or Abbreviated Name (if any)	3. Committee Telephone Number			
	(35	7) 450-876	1	
4. Mailing Address (address where all campaign finance correspondence is received)				
5. City, State, ZIP Code	6. Party	Affiliation (if applicable)		
CANDIDATE INFORMATION (For Candidate)				
7. Full Name of Candidate (include any nickname)		Affiliation or If Independe	nt Candidate	
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	Le publicas 10. County of Regidence			
Judge, Superide Court, MARION County	muly MARiON			
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY	
11. Check one:		Check one:		
Pre-Primary Pre-Election X Annual Nomination Other		Pre-Con	vention	
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Utgoing Treasurer (within 10 days amend Statem	ent of Organization) Post-Cor	nvention	
12. Reporting Period:	_	COLUMN A	COLUMN B	
From: 1-1-15 Through: 12-31-15		This Period	Year to Date	
13. Cash on hand and investments at the beginning of this reporting period.		3,080,44		
14. Cash on hand and investments January 1, current year.			3,080.44	
CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.)	_			
15a. Itemized (use Schedule A)		_	-6-	
15b. Unitemized		-0-	~0-	
	JBTOTAL	-0-	-0-	
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	3,080.44	3080.44	
EXPENDITURES	, , , , ,	3/000.11		
(Note: These amounts include in-kind expenditures and loan repayments.)				
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		-9-	- 0-	
17b. Unitemized		- D-	-6-	
17c. Add lines 17a and 17b in both columns	SUBTOTAL	_ &	-0-	
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	3,080.44	3,080.44	
19. Debts OWED BY the committee (use Schedule D)		5,000.00		
20. Debts OWED TO the committee (use Schedule E)	·	-0-		

CERTIFICATION			
I CERTIPY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.			
Signature of Treasurer Auth	Title Rezsuroz	Date -15-16	
Signature of Candidate (if applicable)		Date /-/5-16	
WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly			
files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana			
Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)			

FOR OFFICE USE ONLY

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(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

FILE NUMBER			
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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
Clayton Graham 7307 Camberward Dr. Indianapolis, IN. 46268 LENDER'S OCCUPATION CANDIDATE		#5,000. LDAN	1-13-12	-0-	\$51000
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION;					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION: SUBTOTAL THIS PAGE OF SCHEDULE D				\$ 5 cm	
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)				\$5,000	